



**ILLINOIS GENERATOR I.D. NUMBER REQUEST FORM**

This Form is applicable **ONLY** if waste is being shipped out of Illinois, or shipped under a generic permit. Please **TYPE** or **PRINT** in ink. **INCOMPLETE FORMS WILL BE REJECTED.**

This # is being requested by \_\_\_\_\_

of (Company) Bosch Trucking

GENERATOR NAME \_\_\_\_\_

LOCATION (not P.O. Box) 5600 S Washington St

City, State & Zip Code Bartonville, IL 61607

County Peoria

Mailing Address \_\_\_\_\_

(if different than above)

City, State & Zip Code \_\_\_\_\_

BUSINESS PHONE: (309) 697-2500 EMERGENCY PHONE: \_\_\_\_\_

CONTACT PERSON: GARY L. NEWLIN

EPA Region 5 Records Ctr.



296331

**Frequency of Transportation (check one)**

☐ 1 = one time only    ☐ 3 = weekly    ☐ 5 = monthly    ☐ 7 = quarterly  
☐ 2 = daily    ☐ 4 = bi-weekly    ☒ 6 = bi-monthly    ☐ 8 = semi-annual.

WASTE DESTINATION: (Site) Safety-Kleen Corp. (5-136-01)

ADDRESS: R.R. #3

City, State & Zip: Pekin, IL 61554

\* 000003, 000004, 000005

**(Must Be Completed)**

- \* Out of State - Indicate Illinois Site Code Number
- \* Generic - Indicate Generic Permit Authorization Number

Return this form to:

IEPA-DLPC #24

Attn: Carrie Agrall

2200 Churchill Road

Springfield, Illinois 62706

RECEIVED

JAN 15 1987

IEPA-DLPC

This Agency is authorized to require this information under Illinois Revised Statutes, 1979, Chapter 111 1/2, Section 1039. Disclosure of this information is required under that Section. Failure to do so may prevent this form from being processed and could result in your application being denied. This form has been approved by the Forms Management Center.

FOR AGENCY USE ONLY

GENERATOR I.D. # 1430055008

EDP \_\_\_\_\_  
Region \_\_\_\_\_  
Manifest \_\_\_\_\_  
IMES \_\_\_\_\_ File \_\_\_\_\_

RECEIVED

This form will be returned to you when a generator number has been assigned. Any questions should be directed to Carrie Agrall at 217/782-6760.

DEC 19 1986

DEC 22 1986

IEPA-DLPC